



Howard County, Maryland

Department Property Tax Accounting

Trash Collection, Watershed Protection Fee Assistance & Bay Fee Hardship Exemptions

Filing Deadline - September 1, 2019

2019

Please Read Instructions Before Completing This Application Answer Every Question or Mark It None

GENERAL INSTRUCTIONS

Howard County provides a credit for the real property tax bill. There is a refuse collection charge assistance program, administered by the Department of Finance, to assist individuals who qualify under the program in payment of the refuse collection charge established under subtitle 20.904.

IMPORTANT INFORMATION

Please note that if your application is filed after **May 1, 2019** you should not expect to receive any tax credit directly on the July 1, 2019 tax bill. You are advised to pay the tax bill as shown if you wish to receive the discount for early payment offered by Howard County.

OTHER REQUIREMENTS BEFORE FILING

You must satisfy four basic legal requirements before your eligibility according to income can be considered:

- The dwelling for which application is being made must be your principal residence, where you reside or expect to reside for more than 6 months of the tax year, including July 1, 2019.
- On July 1 of the year in which application is made, the individual** owns residential property for which the County provides refuse collection services; or
- Owens a mobile home that is located in a mobile home park in the County, for which the County provides refuse collection service, if the individual submits evidence that he or she is paying the refuse collection charge to the park owner under subsection [16.511\(d\)](#) of the County Code;
- Income:** The individual's income is 250 percent or less of the poverty level, as established by the U.S. Department of Health

<u>Household Size</u>	<u>Maximum Gross Income</u>
1	\$31,225.00
2	\$42,275.00
3	\$53,325.00
4	\$64,375.00
5	\$75,425.00
6	\$86,475.00

BEFORE YOU BEGIN, YOU WILL NEED THE FOLLOWING ITEMS TO COMPLETE THIS APPLICATION

- Copy of your valid Maryland Government issued photo I.D. (Driver's license or MVA issued I.D. card)
- Federal Tax Return completed by an accredited tax preparer **or**
 - IRS Federal Income Tax Official transcript**
- Federal Tax schedules A, C, D, E, MISC, K-1
- W-2, SSA 1099's, Railroad Retirement, ALL 1099's (Pension, Annuity, IRA's) and rollover deposit if applicable

Submit completed Trash Fee Tax Credit applications no later than Sept. 1, 2019.

For all inquiries about the Trash, Watershed Protection Fee & Bay Hardship Credit Program contact:
Howard County Department of Finance, 3430 Court House Dr., Ellicott City, MD 21043
Ph (410) 313-4076, Fax (410) 313-4099
Email: taxcredit@howardcountymd.gov

HOWARD COUNTY TRASH, WATERSHED PROTECTION FEE ASSISTANCE & BAY HARDSHIP TAX CREDIT APPLICATION

<u>Property Owner(s):</u> Date of Application _____ Property Account Number _____ Owner/Applicant's Name _____ Co-Owner _____ Property Address _____ City _____ Zip _____ A) Your Gross Income \$ _____		
<u>List Other Household Members:</u>		
<u>Name</u>	<u>Age</u>	<u>Income</u>
1. _____	_____	\$ _____
2. _____	_____	\$ _____
3. _____	_____	\$ _____
4. _____	_____	\$ _____
5. _____	_____	\$ _____
6. _____	_____	\$ _____
B) Total Other Household Income		\$ _____

TOTAL INCOME (A+B) \$ _____

INCOME VERIFICATION

In individual cases, an applicant may later be requested to submit additional verification or other evidence of income in order to substantiate the application for the property tax credit. I declare under the penalties of perjury, pursuant to Sec. 1-201 of the Maryland Tax-Property Code Annotated that this application (including any accompanying forms and statements) has been examined by me and the information contained herein, to the best of my knowledge and belief, is true correct and complete, that I have reported all monies received, that I have a legal interest in this property, that this dwelling will be my principal residence for the prescribed period. I understand that the Howard County Department of Finance may request additional information at a later date to verify the statements reported on this form, and that independent verifications of the information reported may be made. I also understand that intentionally providing false information on this application may result in repayments of credits.

Applicant signature

Date

Co- Applicant Signature

Date

For all inquiries about the Aging in Place Credit Program contact:
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Ph (410) 313-4076, Fax (410) 313-4099
Email: taxcredit@howardcountymd.gov